

Instruction sheet for the *Certified Tester Information Form*

Please fill in the form completely, to the best of your knowledge.

Once accepted by the department, these forms become an official record and are maintained as part of the history of the particular company.

Section 1: Company Information

1. Name:
 - a. Fill in the name of the company
2. Address:
 - a. Fill in the COMPLETE street / mailing address of the company
3. Phone:
 - a. Fill in the phone number of the company
4. Fax:
 - a. Fill in the fax number of the company
5. Email Address:
 - a. Fill in the email address of the company and/or of the contact person within the company
6. Business/Contractor License #:
 - a. Fill in the Business License number and/or Contractor License number, if applicable

Section 2: Backflow Assembly Test Kit Information *(Please include all of the test kits used by your Certified Testers):*

1. Serial #:
 - a. Fill in the serial number of the test kit
2. Manufacturer:
 - a. Fill in the name of the manufacturer of the test kit
3. Model #:
 - a. Fill in the model number of the test kit
4. Date of Last Calibration:
 - a. Fill in the date which the test kit was last calibrated

Section 3: Certified Tester Information *(Please include all of the Certified Testers within your company):*

1. Name of Tester:
 - a. Fill in the name of the person who is certified to test backflow prevention assemblies
2. Certificate #:
 - a. Fill in the certificate number issued by the training institution after the *Backflow Assembly Tester* course has been completed
3. Expiration Date #:
 - a. Fill in the expiration date of the certificate

Notes:

1. This form is required to be completed and sent to the Miami-Dade Water & Sewer Department, Cross-Connection Control Unit along with copies of the following items:
 - a. Business/Contractor License, if applicable
 - b. Certificate of Liability Insurance
 - c. Calibration Certificate for the backflow prevention assembly Test Kit(s)
 - d. Backflow Prevention Assembly Tester Certificate(s)
 - e. Contractor License of the Backflow Prevention Assembly Testers, if applicable

Once this information is accepted, your company will be placed on the ***List of Companies with Certified Testers***, which is distributed to our customers.

2. This form, along with the corresponding items, can be sent to the Miami-Dade Water & Sewer Department, Cross-Connection Control Unit via mail at:
 - a. 1001 NW 11th Street, Miami, FL 33136 -or-
 - b. Fax: (305) 547-3175 or (305) 545-9555.